

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000175839

**Entity Name:** 421 A4 12TH AVE SOUTH LLC

**Current Principal Place of Business:**

C/O CHEFFY PASSIDOMO, P.A.  
821 FIFTH AVENUE SOUTH  
NAPLES, FL 34102

**Current Mailing Address:**

PO BOX 2544  
NAPLES, FL 34106 US

**FEI Number:** 81-4570201

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHEFFY PASSIDOMO, P.A.  
821 FIFTH AVENUE SOUTH  
NAPLES, FL 34102 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** BRIAN J THANASIU

04/27/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name WILLIAMS HASEOTES, KRISTEN  
Address PO BOX 2544  
City-State-Zip: NAPLES FL 34106

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** WILLIAMS HASEOTES , KRISTEN

MGR

04/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date